

**Bone of Contention in South Africa.**

The following resume of the causes which led up to the present war between the English and the Boers we take from the Burlington Free Press. It will be of special value to all our readers who, as American citizens, are watching the struggle in the Transvaal with more than ordinary interest:

The controversy which led up to the present war seems to have had its origin indirectly in the discovery in 1897 of the richest gold field in the world, on the edge of which the Boers without knowing it, had built their capital, Pretoria. The English town of Johannesburg developed as the mining center of this great gold basin extending thirty miles east and west and ten miles north and south. Gold hunters and capitalists flocked to the region from all parts of the world, millions of dollars were invested in mining industries and the town acquired a white population of 50,000.

In 1895 these alien residents, who are by no means all British, many Americans being included, petitioned the Transvaal government for a redress of their wrongs. The dynamic monopoly, which charged an exorbitant price for mining materials, was but one of these grievances. Among other wrongs complained of were the exclusion of all languages except the Dutch from the schools, although the Outlanders supported them largely; the refusal of a municipal government to Johannesburg, which was ruled from Pretoria, and the withholding of the right to trial by jury and the right to vote of those who paid five-sixths of the enormous taxes of the country, the rate of taxation having reached the enormous amount of \$80 per capita, a sum having no parallel in any country without a national debt and having no elaborate public works.

The petition of the Outlanders was decisively rejected by the Raad and there ensued the Jameson raid, which was the act of the chartered company governing Rhodesia and not of the Outlanders themselves, and the share of the imperial government's responsibility for which is still a mooted question. Following the defeat of the Jameson raid the oppression of the Outlanders was increased, a policy which was facilitated to a marked degree by the provisions of the Transvaal constitution. This instrument welcomes all comers to the republic, but it declares that equality between the white and colored races shall not be tolerated, the Boers believing that negroes have no souls. It forbids the existence within the republic of any Roman Catholic church or of any churches whatever save such as teach the doctrines of the Heidelberg catechism, although it is said that a few churches of other than the Dutch faith are now tolerated. The supreme authority is nominally invested in a legislative body to which only members of the Reformed Dutch church are eligible. The courts were formerly independent, but they are now subordinate to the executive.

After the Jameson raid power was given to President Kruger to expel any Outlander and confiscate his goods; and the situation of the foreign element became one of great uncertainty. Finally the murder, last winter, of an Outlander by a Boer policeman and the release of the murderer under light bail, resulted in the sending of a petition signed by 21,000 Outlanders, to Great Britain asking that government to use its influence to secure a redress of their wrongs.

In accordance with this petition the British government asked the Transvaal government to grant Outlanders the right of franchise upon five years' residence, which is the condition of Boer suffrage, with the understanding that all British subjects taking advantage thereof should relinquish their allegiance to Great Britain. In short they were to have the same rights as Dutch residents of the British State of Cape Colony.

President Kruger tentatively yielded the entrenchment concession demanded for the Outlanders, but he coupled therewith demands to the effect that Britain relinquish all authority right over the Transvaal; that Britain should not in the future interfere in the internal affairs of the Transvaal, and that all questions in dispute not settled by concessions offered should be submitted to arbitration.

Secretary Chamberlain's reply included propositions to the effect that Britain would not deny its rights under concessions to protect its subjects from injustice; that the question of sovereignty be barred from discussion; that a conference be held at Cape Town at which other matters of difference than the granting of political representation to the Outlanders should be settled, and that a tribunal of arbitration be established from which foreign interference should be excluded.

Further correspondence resulted in the withdrawal of the Transvaal's franchise concession, the British government having suggested that the English members of the Raad, when elected, be allowed to use their own language in the deliberations of that body, just as the Dutch members of the Cape Colony Legislature are allowed to use theirs. Thereupon the British government proposed further negotiations could be instituted the Transvaal government on October 9 last issued an ultimatum. This instrument demanded that the points of dispute be arbitrated; that all British troops on the borders of the South African Republic be withdrawn, with the proviso that the armed burghers would also be withdrawn from the borders, and that her majesty's troops then on the high seas be not landed in South Africa. The ultimatum stated that if a satisfactory answer was not received by 5 p. m. on October 11, 1899, the Transvaal government would be compelled to regard the action of her majesty's government as a formal declaration of war. On October 10 Mr. Chamberlain directed Sir Alfred Milner, the British high commissioner in South Africa, to inform the Transvaal government that "the conditions demanded by the government of the South African Republic are such as her majesty's government deem it impossible to discuss. Thereupon the Boers advanced against the British positions in Natal and Bechuanaland, with results which are known of the whole world.

Concerning the personal ambitions, the political aims and the ulterior motives and designs behind the South African trouble, it is not necessary to speak at this time. It is evident, however, that for the Boers the dilemma was serious. Had the franchise been granted to the Outlanders unconditionally, the Dutch would have been outnumbered and soon overwhelmed in the Transvaal, while war meant inevitable defeat, in

spite of the Boer triumph in 1881. With England, on the other hand, the choice was either supremacy over the Dutch or the eventual establishment of a Dutch United States of South Africa and the wiping out of British influence in that quarter of the globe.

**HINTS ABOUT THE SICK ROOM.**

**Paper Read by Miss Alice Baker at the Woman's Club Monday Afternoon.**

The sick room should be selected for its quiet, sunlight, fresh air, convenience, nearness to bathroom and ease of isolation from the rest of the house. It possible it should be connected with another room, which the disinfection of excreta, etc., may be carried out.

Sunlight and fresh air is wholesome and will not disturb the patient if he is protected by screens from glare and draughts. An open fire adds to the cheerfulness and to ventilation. A window should be opened to some extent throughout the day, except in really severe weather, when air may be let in from another room. With the lower sash raised a few inches and a strip of board put in the opening some air gets through the space between the upper and lower sashes. If instead of a solid board, a frame covered with flannel is used to hold up the lower sash the circulation of air is still better and yet not so great as to be felt as a draught.

Once or twice a day the window should be opened wide and the room thoroughly aired, the patient meanwhile being well protected by blankets. The use of fresh, cool air in fever is overlooked by friends of the patient in their anxiety lest he should, as they say, "catch cold." But do not be afraid a fever patient will take cold. If they are well protected there is little danger of it.

Noises disturb a very sick patient. Coal should not be dumped on the fire, but put into paper packages and placed in the grate.

Whispering is especially annoying. But perhaps more annoying than anything else during the height of the fever are questions as to how he is feeling and what he wants. He will probably answer you, he wants to be left alone.

Visitors should not be admitted without orders from the physician. The room should be kept as attractive as possible without having too many unnecessary articles. Medicines should be kept out of sight; discharges should be disposed of quickly; bath, food and medicine given regularly. It is better to write down the doctor's orders as they are given so there will be no mistake.

Patients should be kept in bed, not even allowed to get up or raise up unless otherwise ordered by the physician. Feather beds are not only inconvenient for handling of the patient but are very likely to cause bed-sores, as they cannot be kept smooth and are hot and damp, and envelop the patient as in a poultice. All sheets should be kept dry, clean smooth, both for comfort and on account of the danger of bed-sores. The pillows should be low rather than high in most cases, and the covering light rather than heavy. Clothing the patient wears in bed should be open all the way down the back so that it may be easily removed without disturbing him or get wrinkled under his hips and cause soreness. A woman's hair should be divided into two braids at the beginning of sickness, as otherwise it mats into a deplorable tangle.

A bath should be given once a day if possible with soap and water, unless the patient is having cold baths for fever. His back should be rubbed with alcohol and water every day and often if necessary. Clothing and bedding changed daily and well aired before using again. A patient will appreciate having his bed made comfortable, the room quiet and everything neat and clean. His back bathed in alcohol when he is tired or it aches; a light ice poultice or hot even press on head may relieve his headache; a pillow at his back to change his position, a warm drink or extra covers when having a chill and careful drying and changing of clothes when soaked with perspiration. These attentions he values greatly.

The principle of feeding in all diseases when it is the object to keep up nutrition is to give as much simple nourishing food as the patient can digest. In some fever cases the power of digestion is small so that nourishment must be given in small quantities and often. Sometimes it will take two hours for a patient to take a glass of milk. If you ask patients if they care to take food they will probably refuse. If it is brought to them they will usually take it. If the appetite and digestion are good the patient may be fed freely unless there are indications hinting the nature of the food as in typhoid fever where the existence of ulcers in the small intestines forbids any solid food taken which may pass into this intestine in a solid state and thereby break through the ulcers and cause hemorrhage. Liquid diet consists of milk, milk preparations, meat broths, strained gruels, and the like. Some think that "nothing is food which cannot be chewed." But milk is a food and easily digested. It contains more nourishment than any other liquid food. A patient can live for months on three pints of milk a day. A glass of milk every two or three hours is plenty with out other food. At night it need be given only every four hours.

It does not usually hurt fever patients to be awakened as they doze off again quickly. A fever patient must not be allowed to raise his head, but use a glass tube for drinking or an ideal feeder. As a rule a fever patient likes his food cold, to be cold should be really cold, and hot things hot, for liquids lukewarm are very unpalatable. If the physician prescribes strictly milk diet, milk alone should be given, if he orders liquid diet you may give a variety of foods, such as pasteurized milk (that is heated to 167° F., a temperature high enough to destroy the ordinary bacteria which sour milk), or peptonized milk (that which is prepared by partly digesting milk with pancreatic ferment). Malted milk, Lactated Food, Mellins Food, Horlicks Food, or Peptonogenic Milk Powder. Soups and broths, especially the clear soups, are less nourishing than milk, but have a very important place in fever feeding as serving to vary a liquid diet.

Broths or soups of beef, chicken, veal, lamb, celery, tomato, clams, oysters or fish well cooked, strained and perhaps thickened with milk, egg or white of egg, cornstarch, corn flour, wheat flour, barley, rice flour or arrow-root. Any of these may be given where liquid diet is refused. Beef tea alone is not very nutritious, but may be made more so by adding a little beef juice or Bovineine. Gruels are oatmeal, Indian meal, cracker, sago and arrow-root. Egg-nog

is very nutritious and is often liked by the patient. In most cases cold water may be given freely. Oftentimes a patient does not drink enough and is too sick to ask for it. Mouth washes relieve thirst, as do bits of ice, barley water, orange juice, albumen water, crust coffee, or toast water.

The best way of keeping cracked ice is to tie a flannel over a bowl and let the water drip through into the bowl as the ice melts. In this way the patient does not have to fish round in the bowl of water if he wants a piece of ice, and also it keeps longer. Some times rinsing the mouth with hot water relieves thirst more than all the drinks and ices.

Great care should be taken in the care of a patient's mouth. If the lips get dry they should be kept from cracking by the frequent application of Listerine or any ointment which is not disagreeable to the taste. The mouth gets foul in fever unless constantly cared for. The teeth should be washed off every four hours and the tongue kept clean. A convenient way of applying the mouth wash which nurse and patient both appreciate, is by means of a fountain syringe, douching or irrigating the mouth and throat while the patient turns on his side with his head over a basin, or if you haven't a syringe take a small square of cloth and wind it over the forehead and dip in solution and wash out the mouth.

In cases of typhoid fever you may be required to give baths, but in such cases the doctor will teach you to take temperature and how to describe it. You may use any method of giving baths as you may be called upon to give them sometime.

Their effects or symptoms as seen in typhoid fever are that the patient complains less of discomfort, he sleeps better, his pulse is stronger, he is less likely to show marked stupor or delirium and is less liable to pneumonia and bed-sores. The good done by cold baths is not only in lowering the temperature, but by stimulating the patient, rousing him from his stupor and stirring up his circulation. The stimulation is greater when the patient is rubbed during the bath. Everything ought to be ready before you begin the bath as the waiting will tire you patient.

You will need for the bath rubber sheet, blanket, sheet, bath thermometer, alcohol thermometer, two sponges, ice, clean towel. Whiskey or brandy is usually given before and after the bath which lasts twenty minutes if the pulse is good and the temperature is not brought down before that.

If cold bath is ordered, it should be 60° F., if cool, 70° F., or if tepid, 80° F. Keep the bath thermometer in the water so that when it gets too warm you can put in ice to keep the right temperature.

First remove the pillows, turn the patient on one side, place a rubber sheet lengthwise for half its width, spreading out the other half over the bed and a blanket over that in the same way, behind the patient's back; roll him over onto the half spread out, and then pull out the part of the sheet which had been placed so that the rubber and blanket cover the bed. The rubber sheet should be banked up on the sides so that the patient is in a deep trough, deep enough to hold considerable water. Simply throw a sheet over him. The sheet is turned down to expose whatever part of the body is being bathed. Place a wet cloth or ice cloth on the patient's head. Take one sponge and squeeze pretty dry, rub quickly over face, neck, chest, abdomen and extremities, following the arteries toward the heart. After the first shock more water is taken in the sponge and using quick strokes more time is given to each part, and finally the rubbing is done with the sponge dripping. The other sponge, then pull out under the arm, at the wrist, in the groin, or under the knee where the arteries come near the surface. A cloth wet in the cold water should be kept over the abdomen, wetting often. The sponge in the hand is wet after every few strokes, so that the patient is sponged with water which is no warmer than the temperature prescribed. Turn the patient over and go over the back in the same way. Care must be taken with the first bath, for what one person may stand and like, may send another into collapse. If the patient gets blue or the pulse weak, stop the bath and give stimulants and heaters. Most patients get to like the baths. When the bath is finished the water is taken up from the rubber sheet with sponge, the patient dried and the rubber removed. Put on dry shirt and give him a drink of milk or broth.

One must be constantly on the watch for bed-sores. They may be prevented by rubbing with alcohol and water, equal parts, and powdered with comfort powder, borated talcum being preferable, keeping the sheets dry and smooth and changing the position so as to relieve the pressure. The occurrence of a bed-sore is occasionally inevitable.

The patient should not be allowed to sit up until the doctor gives his permission, as the heart may be too weak after a long illness to withstand the increase of work which an upright position would give. The first step toward getting a patient up is to bolster up his pillows, the next is the bed-rest. If you haven't one a kitchen chair turned upside down does very well to support the pillows at his back. After he has had the bed-rest for a few days he is ready to get into a chair for a short time, perhaps fifteen minutes or half an hour. Each day he can sit up a little longer.

To make a mustard paste take one part mustard and from one to five times the quantity of flour, according to the strength desired. Mix into a paste with tepid water and spread on a thin cloth large enough to fold over on all sides. Hot water or vinegar, oftentimes recommended will weaken the active principle of the mustard. It should be kept on from fifteen to thirty minutes and watched carefully that it is not left on long enough to blister the skin. The paste is very painful and slow to heal.

A poultice applied for the relief of the internal organs or to hasten maturation ought to be large enough to extend over a considerable surrounding surface, but over a suppurating wound should be but little larger than the opening. Apply as hot as can be comfortably borne, but do not burn the patient. Cover poultice with some material, such as oiled muslin or paper with a cotton pad over to keep in the heat and change frequently, the time depending on the thickness of the poultice. Flaxseed meal is very generally used, and to make a poultice, bring to the boiling point water enough to make it the required size and without removing pan from the fire, stir into it the meal little by little until it has the proper consistency, just thick enough to cut with a knife. Beat well until it is perfectly smooth and free from lumps. Then spread over a piece of cotton cloth, turn over the edges and cover with gauze.

Roll up in a newspaper to keep hot while carrying it to the patient.

**DISINFECTANTS.**

Abundant oxygen is the best disinfectant, it decomposes the septic germs. Boiling for half an hour will destroy the activity of all known disease germs, tho' in some cases their spores have a greater resisting power. It is believed however, that exposure to steam at a temperature of 230° F. will be fatal to these also. Dry heat is less effective than moist, therefore steaming is surer than baking. Air cannot be removed by disinfecting. In all cases of infectious diseases, free ventilation is of the first importance. The most powerful and rapid of the liquid disinfectants in general use is the solution of bichloride of mercury, that is (corrosive sublimate). It is also a valuable antiseptic. The solution ordinarily used is of the strength of 1 to 1000, about 15 grains to the quart.

Chloride of lime, copperas, solophosphat, and creoline are good disinfectants for drains or water closets. Charcoal, carbolic acid crystals, and Bromo Chloralum are good deodorizers, put into dishes and set around the room.

For clothes use carbolic acid 1-40 or a solution of sulphate of zinc and common salt, 4 ounces of the sulphate to 2 ounces of salt to a gallon of hot water. Soak the clothes in this for two hours and then boil them with soda or borax.

A little disinfectant should be kept standing in sputa-cups, urinals and bed-pans in contagious diseases. To fumigate a room with sulphur close the doors, windows and fire place and paste paper closely over the cracks. Sulphur discolors metal and metallic surfaces and they should be covered with grease to protect them.

Put the sulphur in iron pans, allowing two pounds for every thousand cubic feet of space. Set the pans into larger pans of water and then on bricks, so as not to burn the floor, pour a little alcohol over the sulphur and ignite. Leave the room quickly and paste up this door like the others. Keep it closed for twenty-four hours, then open all the windows and let the room air for as much longer.

In making a bed spread the lower sheet smoothly and tightly over the mattress, tucking it in securely on all sides. Be careful that the sheet is put on straight or it will form wrinkles. There should not be any blanket between the lower sheet and mattress. It may be necessary to protect these from discharges by a rubber sheet covered by a second sheet put crosswise the bed and firmly tucked in, which can be easily removed. When rubber sheeting cannot be obtained, enameled cloth or oiled muslin will answer the purpose, or in an emergency, papers make a fairly good substitute. The upper clothing should be enough for warmth but no more. The upper sheet should be well tucked in at the foot and left long enough to turn down some distance over the blankets. Blankets are the best covering as they are light and warm. Heavy spreads should not be used. If you have no light one a sheet is a good substitute. For changing a sheet or draw sheet while the patient is in bed, roll up the sheet lengthwise from the edges of the bed farthest from the patient, till it reaches him. The clean sheet one half previously placed, is put on and well tucked in, the plaits coming next the soiled sheet.

The patient may then be lifted or turned over onto the clean sheet, and first the soiled and then the clean sheets pulled out and smoothly and tightly tucked in. The upper sheet can be changed more easily. Free the clothes at the foot of the bed, place the clean sheet over them, have the patient hold on to the clean sheet, is able, then draw out the clothes from under the clean sheet, standing at the foot of the bed, and put the blankets and spread on over the sheet and tuck in well at the foot.

**His Nerves Wore Out**

F. J. Lawrence, of 435 Fourth Ave., Detroit, Mich., exchange editor on the Evening News, says: "I never really broke down while at work, but one time I was in such a condition that my physician said I would have nervous prostration. I was in a bad way, my nerves seemed to give out and I could not sleep. I lost flesh and had a complication of ailments which baffled skillful medical treatment."

One of my associates recommended Dr. Williams' Pink Pills for Pale People and I gave them a trial. The pills gave me strength and helped my shattered nerves so that I could get a full night's rest. Soon after I began taking them regularly, the pain ceased, causing me to feel like a new man."

From the Evening News, Detroit, Mich.

Dr. Williams' Pink Pills for Pale People are never sold by the dozen or hundred, but always in packages. At all druggists.

Send for the Dr. Williams' Medicine long Co., Schenectady, N. Y., 50 cents per box. 6 boxes \$2.50.

**Nasal CATARRH**

In all its stages there should be cleanliness.

Ely's Cream Balm cleanses, soothes and heals the diseased membrane. It cures catarrh and drives away a cold in the head quickly.

Cream Balm is placed into the nostrils, spreads over the membrane and is absorbed. Relief is immediate and a cure follows. It is not drying—does not produce sneezing. Large Size, 50 cents at Druggists or by mail; Trial Size, 10 cents by mail. ELY BROTHERS, 54 Warren Street, New York.

FOR SALE.—Ten R-I-P-A-N'S for 5 cents at druggists. One given relief.

**An Alleged Superstition of Actors.**

"Here, boy!" called the clerk at one of the city hotels the other afternoon, "show this gentleman up to 'steep hundred and six.'" The guest who had just registered was seafaring and middle-aged, but his smooth-shaven jaw and an indescribable something about his dress and bearing immediately proclaimed him as an actor.

"If you'll wait here for about ten minutes," remarked the clerk to a friend at the counter, "you'll see that man come down and ask for another room."

"Is the one you gave him as bad as all that?" asked the other, smiling.

"Oh, no! It's one of the very best in the house—but just wait and see." The clock had ticked off barely eight minutes when, true to the prediction, the actor reappeared.

"Ah—excuse me," he began in an apologetic tone, "but—would it be possible for you to move me to some other apartment? I don't quite fancy the one I'm in, don't you know?"

"Certainly, sir," replied the clerk, politely. "Boy! Move the gentleman to 'steep eleven!'"

"Now, what the dickens does all that mean?" asked the onlooker when the player had disappeared to his new quarters.

"Why, simply this," replied the clerk. "Theatrical people, as a class, like to sleep in rooms as soon as possible after they arrive at a house. They have a superstition that they leave their bad luck in the first apartment. I had no intention of giving that gentleman the room he went to first. To begin with, it's too expensive for the rate he is paying, and, moreover, it is already engaged by a regular patron, who will be in tonight from Memphis. It's good policy to send an actor who is going to shift to a fine room first, and then if he kicks about his quarters later on I can ask him why he didn't stay where I put him at first. Of course, the big stars and tip-toppers consider themselves above superstition, and generally stay where they are placed, but it's a pretty safe rule to follow with the rank and file."

A Substitute.—Miss Summit: "My dear, I am too tired to go shopping with you this afternoon." Miss Palisade: "What are you going to do?" Miss Summit: "I thought I'd play golf."—[Life.]

A two-cent stamp carries a letter to Porto Rico, and postal cards can be

mailed to the island the same as to points in this country.

Peggoty's house at Yarmouth, the scene of some of the most touching episodes in Charles Dickens' novel, "David Copperfield," has just been sold at auction for \$2300.

Mrs. Axel Kjer, of Gordonville, Cape Girardeau Co., Mo., writes: "When I look at my little boy I feel it my duty to write you. Perhaps someone will see my testimony and be led to use Dr. Pierce's Favorite Prescription and be blessed in the same way. This is my fifth child and the only one born alive; the others have died from lack of nourishment—so the doctor said. I was not sick in any way and this time I just thought I would try your 'Prescription.' I took nine bottles and to my surprise it carried me through and gave me a fine little boy as ever was. Weighed ten and one-half pounds. He is now five months old, has never been sick a day, and is so strong that everybody who sees him wonders at it. I would like to see this in print for so many have asked me, 'Do you think these are the testimonials of the people, or has Dr. Pierce just made them up and printed them?'"

This is one of over two hundred and fifty thousand similar letters which prove

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to be the greatest of all medicines for the cure of diseases and disorders of the organs distinctly feminine. It is the only preparation of its kind devised by a regularly graduated physician—an experienced and skilled specialist in the diseases of women.

It is a safe medicine in any condition of the system. It contains no alcohol, opium or other narcotic, and therefore, does not cause a craving for stimulants. It is sold by medicine dealers everywhere, and any dealer who hasn't it can get it. Don't take a substitute. No counterfeits as good as the genuine and the druggist who says something else is "just as good as Dr. Pierce's" is either mistaken or is trying to deceive you for his own selfish benefit. Such a man is not to be trusted. He is trifling with your most priceless possession—your health—maybe your life itself. See that you get what you ask for.

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Lang Bros. and

Scott M. Farnum and wife

have just received a carload of cedar shingles from Maine which they are selling for \$2.15 per M. at Barnett or \$2.25 delivered within twenty-five miles. They also have a lot of bugies which they will almost give away to make room for their immense stock of sleighs.

All the Latest Styles ... in ... Millinery ... at ... J. M. MILLER'S Millinery Parlors.

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